



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application )  
No. 10/032,267 )  
For: EFFICIENT RE-  
) REGISTRATION OF MOBILE IP  
) NODES  
SINGHAI et al. )  
Examiner: James D. Ewart )  
Filed: December 20, 2001 ) Group No. 2683

RESPONSE TO OFFICE ACTION

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RECEIVED

SEP 16 2004

Technology Center 2600

Dear Commissioner:

In response to the Office Action dated 7/12/2004, please amend the above-identified application as indicated below.

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**CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))**

I hereby certify that this correspondence is, on the date shown below, being:

**MAILING**

deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Karyn D. Lao  
(type or print name)

Date: 9/8/2004

Signature:

**FACSIMILE**

transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: \_\_\_\_\_  
(type or print name)

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

2683  
41

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## AMENDMENT TRANSMITTAL FORM

Customer No.: 23696  
Attorney Docket No.: 020093  
In Re Application of: SINGHAI et al.  
Serial Number: 10/032,267  
Filed: December 20, 2001  
Examiner: James D. Ewart  
Group Art Unit: 2683

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SEP 16 2004

Technology Center 2600

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	5	20	0	x \$18 =	\$0
Independent**	5	5	0	x \$86 =	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$290	\$0
EXTENSION FEES			<input type="checkbox"/> One Month	\$110	\$0
			<input type="checkbox"/> Two Months	\$420	\$0
			<input type="checkbox"/> Three Months	\$950	\$0
TERMINAL DISCLAIMER				\$110	\$0
				TOTAL FEE	\$0

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4.  Fee check in the amount of \$\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5.  Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$0.  
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6.  The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 9/8/04

Signature: Arti A. Kane, Limited Recognition  
858-845-2650

QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 651-4125  
Facsimile: (858) 658-2502

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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Depositor's Name: Karyn D. Lao  
(type or print name)

Date: September 8, 2004

Signature: 

## FACSIMILE

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Depositor's Name: \_\_\_\_\_  
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